



## Policy Update – Employment, Health Care and Disability - March 2014 Newsletter

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**March 26, 2014**

The LEAD Center Policy Update – Employment, Health Care and Disability is a project of the LEAD Center in collaboration with the [Autistic Self Advocacy Network](#).

### In This Issue

- [Highlights from the President's Proposed Budget for 2015](#)
  - [ODEP, LEAD and CMS Host Webinars on Health Care and Employment for People with Disabilities](#)
  - [States Consider Providing Private Health Coverage to Low-Income Adults](#)
  - [Medicaid Expansion Would Cover Nearly 4 Million Currently Uninsured People with Mental Illness](#)
  - [Pennsylvania Proposes medicaid Expansion](#)
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### Highlights from the President's Proposed Budget for 2015

President Obama unveiled his proposed budget for 2015 on March 4, 2014. The proposed budget serves as a starting point for negotiations as Congress works toward passing an appropriations bill to fund government activities in 2015. The president's proposal includes:

- \$400 million in increased funding to the Social Security Administration for pilot programs to help people with disabilities remain in the workforce: These may include supported employment services for people with mental disabilities, employer incentive programs, and assistance to states in coordinating services to workers with disabilities.
- Creation of a Disability Innovation Fund within the Department of Education that would support projects to improve employment outcomes for youth and young adults with disabilities: Projects would include improving access to postsecondary education and employment, improving services for people with disabilities already in the workforce system, and supporting the Promoting Readiness for Minors in Supplemental Security Income (PROMISE) pilot program. The PROMISE program, which began in 2012, provides grants to four states and one regional collaborative of states to operate demonstration projects aimed at improving education and employment programs of children with

disabilities enrolled in the Supplemental Security Income (SSI) program. In addition, the Administration for Community Living would receive funding to develop best practices in supporting youth and young adults in areas such as health, community living, and employment.

- An increase in mandatory funding for Aging and Disability Resource Centers (ADRCs) to \$20 million each year for the next five years: These centers help streamline access to communityMARCH 26, 2014 POLICY UPDATE - Employment, Health Care & Disability | MARCH 26, 2014 2 based long-term supports and services for aging adults and people with disabilities. These services are often vital in order to enable people with disabilities to find and retain employment.
- A \$4 million increase in funding to the National Institute on Disability and Rehabilitation Research (NIDRR), which would go toward strengthening research on improving employment outcomes for people with disabilities.
- Expanding the Money Follows the Person program, which helps people with disabilities transition from institutional settings to supported living in the community: Under this program, people with disabilities may access community-based supports and services using state funding that otherwise would have funded their placement in a nursing home or intermediate care facility.

The White House has published a fact sheet on the impact of its budget on its web site. [http://www.whitehouse.gov/sites/default/files/omb/budget/fy2015/assets/fact\\_sheets/expanding-opportunities-for-people-with-disabilities.pdf](http://www.whitehouse.gov/sites/default/files/omb/budget/fy2015/assets/fact_sheets/expanding-opportunities-for-people-with-disabilities.pdf)

[Back to Top](#)

## **ODEP, LEAD and CMS Host Webinars on Health Care and Employment for People with Disabilities**

In February, the U.S. Department of Labor's Office of Disability Employment Policy (ODEP) and the LEAD Center partnered with Centers for Medicare and Medicaid Services (CMS) to host two webinars on the interaction of health care and employment for people with disabilities. The first webinar, "Innovative Strategies for Using Medicaid State Plan and Waiver Options to Promote Integrated Employment of People with Disabilities," focused on ways to use Medicaid funding to provide services that promote integrated employment. The second, "Implications of HCBS Final Rule on Non-Residential Settings - The Impact of New HCBS Guidance on Employment & Day Services," reviewed new regulations requiring that Medicaid-funded home- and community-based services (HCBS) - including employment training and adult day services - be provided in integrated settings. These regulations require that home- and community-based services

provide individuals with maximum opportunities for community integration, including opportunities to access integrated, competitive employment.

A recording of each webinar, including presentation slides and transcripts, is available online:

- Innovative Strategies for Using Medicaid State Plan and Waiver Options to Promote Integrated Employment of People with Disabilities.  
<http://www.leadcenter.org/webinars/innovative-strategies-using-medicaid-state-plan-and-waiver-options-promote-integrated-employment-pwd>
- Implications of HCBS Final Rule on Non-Residential Settings – The Impact of New HCBS Guidance on Employment & Day Services.  
<http://www.leadcenter.org/webinars/implications-hcbs-final-rule-non-residential-settings-impact-new-hcbs-guidance-employment-day-services>

[Back to Top](#)

## **States Consider Providing Private Health Coverage to Low-Income Adults**

Several states, including New Hampshire, Tennessee and Virginia, are considering taking advantage of a provision in the Patient Protection and Affordable Care Act of 2010 (ACA), which would enable states to provide private health coverage to adults earning less than 133 percent of the federal poverty line (FPL).

The ACA provides significant federal funding to states that expand Medicaid coverage to all adults with incomes less than 133 percent of FPL. Although many states have opted to provide such coverage through their traditional Medicaid program or through special plans called Alternative Benchmark Plans, the ACA also allows states to expand coverage to this population by helping people purchase private insurance. Three states – Arkansas, Iowa, and Michigan – have already opted to expand coverage to this population through private health plans.

Many low-income workers with disabilities – including those who are not otherwise eligible for Medicaid through the Supplemental Security Income (SSI) program – may benefit from states' choice to provide coverage assistance to low-income adults. More information is available through [Kaiser Health News](http://www.kaiserhealthnews.org/Stories/2014/March/04/Tough-Road-for-States-Seeking-Customized-Medicaid-Expansion.aspx).  
<http://www.kaiserhealthnews.org/Stories/2014/March/04/Tough-Road-for-States-Seeking-Customized-Medicaid-Expansion.aspx>

[Back to Top](#)

## **Medicaid Expansion Would Cover Nearly 4 Million Currently Uninsured People with Mental Illness**

A recent study by the American Mental Health Counselors Association has concluded that, in the 25 states that have chosen not to expand Medicaid to cover individuals earning less than 133

percent of FPL as authorized by the ACA, many people with mental illness will lack any source of health insurance coverage. The study found that, among the low-income people with mental illness living in these states, nearly four million lacked access to either private health insurance or to coverage through existing public programs such as Medicaid. These four million individuals account for nearly 80 percent of all currently uninsured people with mental health or substance abuse disabilities nationwide who would be eligible for coverage through the Medicaid expansion.

The study's authors noted that health insurance is "key" to timely and consistent mental health care, which in turn may increase quality of life and the ability to find and retain competitive employment. The full text of the study is available online. [http://www.amhca.org/assets/content/AMHCA\\_DashedHopes\\_Report\\_2\\_21\\_14\\_final.pdf](http://www.amhca.org/assets/content/AMHCA_DashedHopes_Report_2_21_14_final.pdf)

[Back to Top](#)

## **Pennsylvania Proposes medicaid Expansion**

On February 19, Pennsylvania Governor Tom Corbett submitted a proposal to expand Medicaid coverage to adults earning less than 133 percent of FPL, as authorized by the ACA. Corbett's proposal, Healthy Pennsylvania, includes significant alterations to Pennsylvania's existing Medicaid program as well as increased cost-sharing requirements. Changes to existing programs would include:

- Individuals currently enrolled in Pennsylvania's Medical Assistance for Workers with Disabilities (MAWD) program with incomes lower than 133 percent of the FPL, with the exception of those deemed "medically frail," would no longer be enrolled in Medicaid but would instead receive financial assistance to purchase private insurance.
- Individuals currently enrolled in Medicaid will be transferred, based on the results of a health assessment, to one of two new benefit plans: the Low-Risk Benefit Plan, which provides health benefits similar to those seen in the private market; and the High-Risk Benefit Plan, which provides benefits for individuals with complex needs. Both plans would include annual limits on services such as home health care, inpatient and outpatient mental health treatment, radiology tests, specialist visits and prescription drugs. Individuals may be eligible for exceptions to these limits when necessary to avoid death or serious deterioration in health. Waiver programs that provide long-term supports and services to people with disabilities would continue to operate.
- Individuals who are not employed full time would receive incentives to participate in a job training program. The original February 19 proposal would have required nondisabled individuals to participate in job training and work search activities if they were not already working more than 20 hours per week. On March 7, [the governor's office proposed to](#)

[amend the plan](#) to make participation in job training as part of a voluntary pilot project.

Other aspects of the Healthy Pennsylvania proposal would include creation of a Long-Term Care Commission that would make recommendations for improving long-term supports and services for aging adults and people with disabilities. Further information about the Healthy Pennsylvania proposal is available [online](#).

<http://www.wearecentralpa.com/story/d/story/pa-health-advocates-react-to-healthy-pa-change/26836/D8c--MorbEO2AkzILujpTg>

[http://www.portal.state.pa.us/portal/server.pt/document/1365517/healthy-pa-doc\\_9\\_16\\_pdf](http://www.portal.state.pa.us/portal/server.pt/document/1365517/healthy-pa-doc_9_16_pdf)

[Back to Top](#)

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